

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO.

10705175

FILING DATE

11/10/03

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 3RD AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2						
3						
4						
5						
6						
7						
8						
9						
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11						
12						
13						
14						
15						
16						
17	1					
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23	1					
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27	1					
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49						
50						
TOTAL IND.	4					
TOTAL DEP.	23					
TOTAL CLAIMS	27					

	IND	DEP	IND	DEP	IND	DEP
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52						
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						